



Longmont Kids Only Triathlon

Saturday, June 4, 2016

Registration Ends:

12noon, Wednesday, June 1, 2016

Packet Pick-Up & Registration Resumes:

Centennial Pool; 1201 Alpine St.

Friday, June 3 Saturday, June 4

3:30pm-6pm 6am-7am

Day of Race Timeline

Saturday, June 4, 2016

6am-7am: Day of registration
(NO racing up option)

6am-7:30am:

Body marking & equipment set-up

7:30am: 13-17 year olds report to pool deck to line up and receive timing chips.

7:45am: Transition area CLOSED.
1st heat of 15-17 year olds START!

Distances

13-17 year olds

400 yard swim; 6 mile bike;
2 mile run

11-12 year olds

200 yard swim; 6 mile bike;
1.2 mile run

6-10 year olds

100 yard swim; 3 mile bike;
0.6 mile run

AWARDS

Finisher: Everyone receives an event tee-shirt and a Finisher Medal!

Race Highlights

Swimming Heats

11-17 yr olds will be grouped by distance and estimated swim times, fastest times first.

15-17 year olds swim first; followed by 13-14; then 11-12 year olds.

6-10 yr olds will be divided up according to age and sex; 2 people per lane, parallel swimming. 10 year old girls swim first.

Participant Responsibility

Participants are responsible for counting their swim, bike, and run laps.

Parents, spectators and volunteers may assist with counting, but it is ultimately the participants' responsibility.

If a participant does not complete the correct amount of laps, they are not eligible for place awards.

Race will be held regardless of weather.
Sorry, no refunds.

Please check out our website at <http://longmontcolorado.gov/rec> for ALL race details.

Longmont Kids Only Triathlon Entry Form

Name: _____ Male Female

Age participant will be on 6/4/16*: _____ Birth Date: _____

**Circle here if child wishes to 'race-up' & put age as of 12/31/16*

11-12 year olds

200 yd Estimated Swim Time: _____

13-17 year olds

400 yd Estimated Swim Time: _____

E-Mail: _____ Phone #: _____

Address: _____ City, State, Zip: _____

Circle T-Shirt Size: Youth Med Youth Lg Adult Sm Adult Med Adult Lg

Entry Fee Enclosed: ☐ \$30 through 5-1-16 ☐ \$40 begins 5-2-16

Payment: ☐ Cash ☐ Check* ☐ Charge** (Visa/MC/AmEx/Dis)

*Checks made out to: City of Longmont

**For mailed in Credit Card payments, a staff member from Centennial Pool will be calling to collect CC number. Please double check for correct phone number.

Please read and sign the liability waiver below:

MINOR CHILD RELEASE, LIABILITY WAIVER AND HOLD HARMLESS I understand that there are certain risks involved with participating in the City of Longmont activity identified above. On behalf of my minor child identified below, I hereby RELEASE, DISCHARGE AND AGREE TO HOLD HARMLESS THE CITY OF LONGMONT, ITS OFFICERS, AGENTS, VOLUNTEERS, ASSISTANTS, AND EMPLOYEES, from any and every claim, demand or action of any kind arising due to bodily injury, illness, death and/or property damage resulting from any incident which may occur to my minor child as a result of my minor child's participating in the City's activities. This RELEASE, LIABILITY WAIVER AND HOLD HARMLESS STATEMENT does not apply if such injury, death or damage is caused by the willful, reckless or gross negligence of the City of Longmont, its officers, agents, volunteers, assistants or employees.

EMERGENCY MEDICAL AUTHORIZATION: In the event of injury or illness, I give permission to the City of Longmont and its employees and volunteers to obtain emergency medical treatment for me and/or my child(ren)/ward(s). I agree to pay all reasonable expenses for medical and related treatment obtained for me and/or my child(ren)/ward(s) and further agree that the City of Longmont is not liable for payment of such expenses.

PHOTOGRAPH RELEASE: I permit the City of Longmont to take and use photographs of me and/or my child/ward for the purpose of promoting City of Longmont programs and activities. This includes permission to publish photographs of me and/or my child/ward for such purpose. I understand that such photographs of me and/or my child/ward remain the property of the City of Longmont.

Printed Name of Minor Child

Printed Name of Parent or Guardian

Signature of Parent or Guardian

Date